



City of Lewiston Business Parking Application



PLEASE PRINT

Business/Company:		
Billing Address:		
City:	State:	Zip:
Phone #:	Alternate Phone #:	
Card Holders Name:		
Vehicle Make/Model:	Year:	Color:
License Plate:	State:	

Please place a check mark next to the appropriate facility and payment option.

PAYMENT AND FEE SCHEDULE		
<input type="checkbox"/> Monthly Parking	\$55.00	1st month payment and \$5.00 card fee (non-refundable) due at time of application. Billed monthly beginning _____
<input type="checkbox"/> Yearly Parking	\$600.00	\$300.00 and \$5.00 card fee (non-refundable) due at time of application. \$200.00 billed October 1st. \$200.00 billed January 1st.

PARKING FACILITY					
<input type="checkbox"/>	Oak St Garage/Lot	<input type="checkbox"/>	Canal St Garage	<input type="checkbox"/>	Chestnut St Garage
<input type="checkbox"/>	Southern Gateway Garage	<input type="checkbox"/>	Chestnut & Lincoln St Lot	<input type="checkbox"/>	Cedar & Lincoln St Lot
<input type="checkbox"/>	Bates Mill # 5	<input type="checkbox"/>	Ash & Canal Lot***		

***Monthly parking fee is \$69.00, one time fee of \$40.00 for personalized reserved sign (no card needed).

A five working day grace period will be granted on parking invoices, thereafter all parking passes will be de-activated or your car can be towed from the lot you are in.

Signature of Applicant: _____

Date: _____

Card or Sticker # _____

PD Receipt # _____ **Form # 0070**